PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10674079

(Column 1) (Column 0)								SMALL ENTITY		OR SMALL ENTITY		
TO	TAL CLAIMS		(Column 1)		(Column 2)			TYPE		OR		
TOTAL CLAIMS			76					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			52 minus 20=		* 32			X\$ 9=		OR	X\$18=	5)6
IND	EPENDENT CL	AIMS	√ minus 3 =		' 5			X42=		OR	X84=	420
MU	LTIPLE DEPEN	IDENT CLAIM PI					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0"						olumn 2		TOTAL		OR	TOTAL	1766
CLAIMS AS AMENDED - PART II											OTHER	THAN
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	,	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	·
<u></u>	FIRST PRESE	NTATION OF M	JLIIPLE DEF	PENDEN	CLAIM		۱ ا	+140=		OR	+280=	
										OR	TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE		10.1	ADDIT FEE	
		CLAIMS		HIGH		(Column 3)	ì		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT	₩-	NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
NON	Total	*	Minus	**	<u>.</u>	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		<u> </u>		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		J	+140=		OR	+280=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		•				ADDII. I EE						
AMENDMENT C	•	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colui HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=]	X42=			X84=	
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		CLAIM] }	7,72-		OR		
*	If the enter in eath	mn 1 io logo the - ti	no onto la sele		. HON :	luma 2		+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE											
	The "Highest Nur	nher Previously Pa	id For" (Total o	r Indonand	ant\ ic the	highost number	or fou	ind in the enr	ropriato ho	in oo	luma 1	